



Health Services
LOS ANGELES COUNTY

May 10, 2007

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TO: Each Supervisor

FROM: Bruce A. Chernof, M.D.
Director and Chief Medical Officer

**SUBJECT: GRADUATE MEDICAL EDUCATION QUARTERLY REPORT
FIRST CALENDAR QUARTER (JAN-MAR) 2007**

The Graduate Medical Education (GME) Quarterly Report for the first calendar quarter of 2007 is attached. Information in the following report is regularly compiled and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored and co-sponsored residency training programs.

Housestaff Placement at MLK-Harbor Hospital, formerly King/Drew Medical Center (KDMC)

On November 1, 2006, the Charles R. Drew University of Medicine and Science notified the Accreditation Council for Graduate Medical Education (ACGME) of its decision to "voluntarily withdraw" from its role as the primary institutional sponsor and to close all fifteen (15) ACGME-accredited residency programs at KDMC, effective July 1, 2007. The University's action was prompted by the Centers for Medicare and Medicaid Services' (CMS) September 22nd notice to the Medical Center to terminate its certification on November 30, 2006.

The total housestaff complement, medical and dental, is two hundred fifty-two (252). The ACGME approved the University's plan to place approximately two hundred forty-one (241) KDMC medical housestaff into educational rotations at twenty three (23) other institutions to allow each resident to continue training for the remainder of the 2006-07 academic year. Seventy two (72) medical housestaff will complete training by June 30, 2007. The remaining one hundred sixty-nine (169) medical residents are currently being placed in training programs at other sponsoring institutions. In accordance with ACGME requirements, in the event of program closure, the primary sponsor, in this case Drew University, is responsible for the placement of its housestaff.

As of March 16, 2007, one hundred thirty (130) housestaff have received solid placement offers of acceptance. Of the remaining thirty nine (39) housestaff, thirty seven (37) have been interviewed and are awaiting response while two (2) housestaff have not interviewed as of yet.

The County is the primary sponsor for the General Dentistry and the Oral and Maxillofacial Surgery programs at KDMC. Both programs are accredited by the American Dental Association. There are eleven (11) interns and residents in these programs. In mid November, 2006, the program director issued a letter of intent to the Commission on Dental Accreditation (CDA) to transfer sponsorship of both programs to Harbor-UCLA Medical Center. In March, 2007, the CDA approved the program transfer.

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213) 240-8101
Fax: (213) 481-0503

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Information on Program Accreditation Status and Housestaff Totals, usually included as Attachment I, is not provided in this report. New data will only become available in July, at the start of the academic year when housestaff totals are revised and/or as a change in training program status occurs. Housestaff and program status data, presented in the last quarterly report of January, 2007, remain unchanged.

Total Housestaff Numbers by Facility

<u>Total:</u>	<u>1,714</u>	(Academic Year 2006-2007)
LAC+USC	917	
Harbor-UCLA	462	
King/Drew	252	(until July 1, 2007)
OVMC	83	

Information in the attached reports reflects the following:

I. 2006-07 L.A. County Resident Physician Complement: DHS compared with all other Residency Programs within L.A. County (Attachment I)

There are a total of 3,719 interns, residents and fellows who are in medical education training programs within Los Angeles County. DHS is currently training forty six percent (46%) of L.A. County's total resident physician complement. Of the remaining fifty four percent (54%), approximately three percent (3%) rotate through DHS facilities.

II. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for 1,815 housestaff who completed County training programs from 2003 through 2006 are presented in this report. The next verification of board certification status will occur in October, 2007, and will include a final update of board certification achievement for 2004, updated results for 2005 and 2006, and incorporate new results for housestaff who complete training in 2007.

III. Facility Compliance with Resident Supervision Guidelines (Attachment III)

Fiscal Year 2005-06 Summary

System-wide compliance with fourteen (14) of seventeen (17) resident supervision indicators reflect continued improvement however, additional opportunities for improvement continue to exist. Aggregate totals for three (3) indicators failed to meet the eighty percent (80%) compliance threshold. Re-audits continue to closely monitor compliance in these areas. Facilities that demonstrated the best performance and/or a greater than fifteen percent (15%) improvement received cash awards for the purchase of equipment for patient care. In fiscal year 2005-06, a grand total of two-hundred thousand dollars (\$200,000) was awarded.

If you have any questions or need additional information, please let me know.

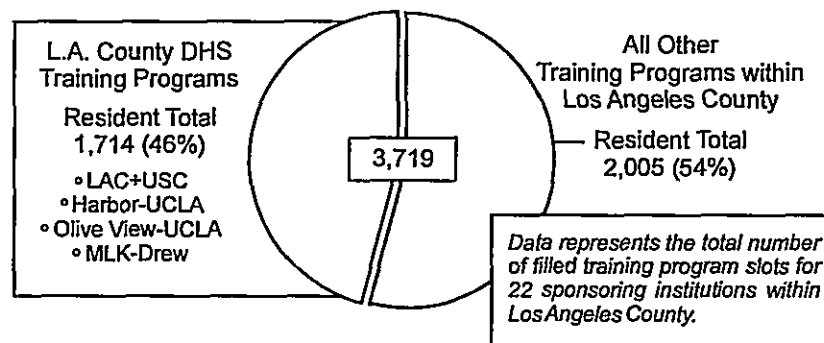
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Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

Resident Physicians
in L.A. County DHS Training Programs
compared with
Resident Physicians in All Other Residency Programs
within L.A. County

2006-07
Los Angeles County
Resident Physician Complement
Includes Interns, Residents and Fellows
in ACGME and ADA Accredited Programs



○ Sources:

- Accreditation Council for Graduate Medical Education (ACGME.org "Sponsoring Institutions")
- The American Dental Association (ADA.org "California postgraduate schools.doc")
- L. Opas, MD, DIO, LAC+USC Medical Center
- R. Leathers, DDS, MLK-Harbor Hospital

Medical Specialty/Subspecialty Board Certification for Los Angeles County Department of Health Services Residents and Fellows

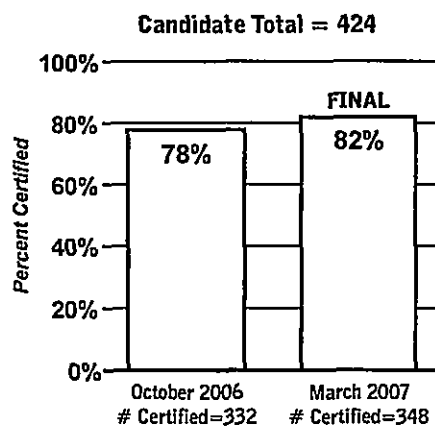
The Office of Clinical Affairs and Affiliations (OCAA) verifies the medical specialty board certification status of County-trained physicians with the American Board of Medical Specialties (ABMS) for the provision of updated results presented to your Board bi-annually.

Reporting Medical Specialty Board Certification

Fifteen of the 24 ABMS medical specialty member boards require two examinations, the written qualifying exam and the oral certifying exam. Nine medical specialty boards require one written certifying exam. Only eight of the 24 boards impose time limitations for initial testing upon completion of residency training. The majority of physician candidates have unlimited time to apply. Data in this report are the results of the certifying examination presented by facility, in three-year running totals. At the end of each academic year, new physician candidates are added while the earliest candidates are re-verified for a final result then eliminated from the three-year total.

The final verification of 2003 physician candidates, illustrated below, shows a 4.84% increase in certification achievement since the prior October, 2006 verification:

2003 Medical Specialty/Subspecialty Board Certification Achievement Final Results as of March 2007



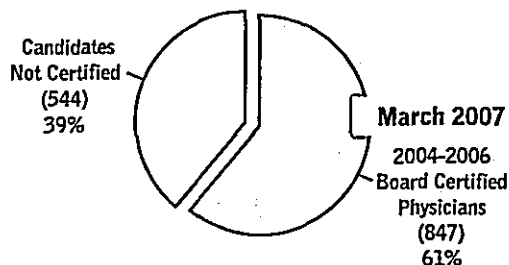
2004 - 2006 Board Certification Results as of March 2007

As of March, 2007, board certification verification was completed for an aggregate total of 1,391 housestaff who completed County training programs in years 2004 through 2006. Sixty one percent of the total have achieved board certification. The following pages provide facility-specific certification results.

Candidates completing residency training/ fellowships from 2004 through 2006

Candidate Total = 1,391

LAC+USC Medical Center — 426
Harbor-UCLA Medical Center — 230
King/Drew Medical Center — 225
Olive View-UCLA Medical Center — 72



**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2004-2006**

Attachment II
page 3

Certification Types- General (G), Subspecialty (S)
No Candidates

☐ Harbor-UCLA Medical Center

PROGRAM	2004			2005			2006			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Anesthesiology (G)	4	1	25%	5	3	60%	4	0	0%	12 Years
Dermatology (G)							1	1	100%	No Limit
Emergency Medicine (G)	13	13	100%	13	10	77%	12	0	0%	No Limit
Family Medicine (G)	12	12	100%	12	12	100%	11	9	82%	No Limit
Sports Medicine (S)				2	0	0%	2	2	100%	
Internal Medicine (G)	16	16	100%	18	18	100%	24	18	75%	No Limit
Cardiology (S)				7	6	86%	5	4	80%	
Cards-Electrophysiology (S)							2	2	100%	
Intervent Cardiology (S)				1	1	100%	3	1	33%	
Endocrinology (S)				2	2	100%	4	4	100%	
Gastroenterology (S)	3	3	100%	1	1	100%				
Infectious Disease (S)	1	1	100%	2	2	100%	2	2	100%	
Nephrology (S)	1	1	100%				4	4	100%	
Oncology/Hematology (S)				3	3	100%	3	2	67%	
Pulmonary Disease (S)				2	2	100%	2	2	100%	
Rheumatology (S)	1	1	100%	1	1	100%				
Medical Genetics (G)				1	1	100%				No Limit
Neurology (G)	4	4	100%	2	0	0%	2	0	0%	No Limit
Neurophysiology (S)				2	0	0%	2	0	0%	
¹ Obstetrics & Gynecology (G)	5	0	0%	5	0	0%	4	0	0%	No Limit
Gynecologic Urology (S)	1	0	0%				1	0	0%	
Maternal-Fetal Medicine (S)				1	0	0%	1	0	0%	
² Orthopedic Surgery (G)	4	3	75%	3	0	0%	3	1	33%	No Limit
Foot and Ankle (S)				1	0	0%	1	0	0%	
Pathology (G)	4	4	100%	2	1	50%	2	0	0%	5 Years
³ Surgical Pathology				2	0	0%	3	2	33%	
Pediatrics (G)	10	10	100%	10	10	100%	9	5	56%	No Limit
Emergency Peds (S)				2	0	0%				
Peds Genetics (S)							1	0	0%	
Peds Infectious Disease (S)							1	0	0%	
Neonatology (S)	2	0	0%	2	0	0%	1	0	0%	
Peds Critical Care (S)				2	2	100%	2	1	50%	
Psychiatry (G)	6	3	50%	6	0	0%	6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	1	1	100%	2	0	0%	3	0	0%	
Radiology (G)	5	5	100%	5	5	100%	5	5	100%	No Limit
Interventional Radiology (S)	1	0	0%				1	0	0%	
Neuroradiology (S)				1	0	0%	1	0	0%	
Surgery (G)	3	3	100%	4	3	75%	5	4	80%	3 Years
Vascular Surgery (G)							1	0	0%	No Limit
TOTALS	97	81	84%	120	80	67%	134	69	51%	

**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2004-2006**

Attachment II
page 2

Certification Types- General (G), Subspecialty (S)
No Candidates

☐ LAC+USC Medical Center

PROGRAM	2004			2005			2006			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Allergy & Immunology (G)				2	2	100%				No Limit
Anesthesiology (G)	11	4	36%	15	8	53%	14	2	14%	12 Years
Pain Management (S)				1	1	100%				
Colon & Rectal Surgery (G)	2	2	100%	3	2	67%	3	0	0%	5 Years
Dermatology (G)	3	3	100%	2	2	100%	3	2	67%	No Limit
Emergency Medicine (G)	18	18	100%	18	17	94%	17	2	12%	No Limit
Internal Medicine (G)	50	48	96%	54	47	87%	57	39	68%	No Limit
Cardiovascular Disease (S)	4	4	100%	4	4	100%	4	2	50%	
Endocrinology (S)	2	2	100%	3	3	100%	2	2	100%	
Gastroenterology (S)	4	4	100%	5	5	100%	3	3	100%	
Geriatric Medicine (S)				2	2	100%	1	1	100%	
Hematology & Med Onc (S)	3	3	100%	3	3	100%	4	4	100%	
Infectious Disease (S)	1	1	100%	2	2	100%	2	2	100%	
Nephrology (S)	4	4	100%	4	4	100%	4	3	75%	
Pulmonary & Critical Care (S)	5	5	100%	4	3	75%	6	3	50%	
Rheumatology (S)	2	2	100%	3	2	67%	3	1	33%	
Nuclear Medicine (G)				1	0	0%	1	0	0%	No Limit
Neurology (G)	6	2	33%	5	0	0%	1	0	0%	No Limit
Neurophysiology (S)							2	0	0%	
Neurological Surgery (G)				2	0	0%	2	0	0%	5 Years
1 Obstetrics & Gynecology (G)	12	0	0%	12	0	0%	10	0	0%	No Limit
Female Pelvic Medicine (S)				1	0	0%	1	0	0%	
Gynecologic Oncology (S)							2	0	0%	
Maternal-Fetal Medicine (S)							1	0	0%	
Repro Endocrin & Infertility (S)	1	0	0%	1	0	0%	1	0	0%	
Ophthalmology (G)	5	4	80%	6	4	67%	6	0	0%	No Limit
2 Orthopedic Surgery (G)	11	1	9%	10	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	2	1	50%	1	1	100%	1	0	0%	
Otolaryngology (G)	4	4	100%	4	3	75%	4	0	0%	No Limit
Pathology (G)	4	4	100%	6	6	100%	12	8	67%	5 Years
Cytopathology (S)	3	2	67%	4	4	100%	4	4	100%	
Hematopathology (S)	1	1	100%	2	0	0%	2	0	0%	
Neuropathology (S)				1	1	100%				
3 Surgical Pathology				7	7	100%	7	5	71%	
Pediatrics (G)	9	8	89%	14	12	86%	15	11	73%	No Limit
Peds/Internal Med (G)	11	2	18%	5	4	80%	2	0	0%	
Neonatal-Perinatal (S)	4	3	75%	2	1	50%	2	0	0%	
Plastic Surgery (G)	3	2	67%	2	1	50%	4	0	0%	2 Years
Psychiatry (G)	7	2	29%	9	0	0%	16	1	6%	No Limit
Child/Adolescent Psychiatry (S)	4	1	25%	8	1	13%				
Forensic Psychiatry (S)	2	0	0%	3	0	0%	4	0	0%	
Radiology (G)	10	9	90%	9	9	100%	12	11	92%	No Limit
Intervent Radiology (S)							4	0	0%	
Neuroradiology (S)				1	0	0%	5	0	0%	
Radiation Oncology (G)	2	2	100%	1	1	100%	1	0	0%	No Limit
Surgery (G)	2	2	100%	8	7	87%	6	3	50%	3 Years
Surgical Critical Care (S)	1	0	0%	2	2	100%	3	3	100%	
Vascular Surgery (G)				1	0	0%	1	0	0%	No Limit
Thoracic Surgery (G)				1	1	100%	2	0	0%	5 Years
4 Urology (G)	3	1	33%	3	0	0%	3	0	0%	5 Years
TOTALS	216	151	70%	257	163	63%	270	112	41%	

**Medical Specialty/Subspecialty Board Certification
Los Angeles County DHS Trained Residents and Fellows
2004-2006**

Attachment II
page 4

Certification Types- General (G), Subspecialty (S)
No Candidates

☐ **King/Drew Medical Center**

PROGRAM	2004			2005			2006			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Anesthesiology (G)	4	3	75%	6	3	50%	3	0	0%	12 Years
Dermatology (G)	2	2	100%	2	2	100%	2	0	0%	No Limit
Emergency Medicine (G)	13	13	100%	12	9	75%	11	0	0%	No Limit
Family Medicine (G)	8	7	87%	7	7	100%	7	7	100%	No Limit
Internal Medicine (G)	13	11	85%	13	13	100%	11	9	82%	No Limit
Endocrinology (S)	2	2	100%	3	3	100%	3	3	100%	
Gastroenterology (S)	1	0	0%	2	2	100%				
Geriatric Medicine (S)				5	1	20%	3	0	0%	
Infectious Disease (S)	2	1	50%	1	1	100%	1	1	100%	
1 Obstetrics & Gynecology (G)	2	0	0%	4	0	0%	1	0	0%	No Limit
Ophthalmology (G)	2	1	50%	1	1	100%	2	0	0%	No Limit
2 Orthopedic Surgery (G)	2	0	0%	4	0	0%				No Limit
Otolaryngology (G)				2	2	100%	1	0	0%	No Limit
Pediatrics (G)	12	6	50%	14	6	43%	13	2	15%	No Limit
Psychiatry (G)	6	0	0%	4	0	0%	7	0	0%	No Limit
Radiology (G)	5	4	80%	Programs Withdrawn						No Limit
Surgery (G)	6	5	83%							3 Years
TOTALS	80	55	69%	80	50	62%	65	22	34%	

☐ **Olive View-UCLA Medical Center**

PROGRAM	2004			2005			2006			INITIAL CERTIFICATION TIME LIMIT
	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	
Internal Medicine (G)	20	19	95%	19	17	89%	13	9	69%	No Limit
Hematology & Med Onc (S)	4	4	100%	1	1	100%	2	0	0%	
Int Med & Emer Med (S)	2	2	100%	1	1	100%				
Nephrology (S)	2	2	100%	2	2	100%	3	3	100%	
Rheumatology (S)	1	1	100%	1	1	100%	1	1	100%	
TOTALS	29	28	97%	24	22	92%	19	13	68%	

- Obstetrics and Gynecology** candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam. Certification results reflect little or no change due to the additional time requirement
- Orthopedic Surgery** candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam. There are little or no changes in the verification results
- Surgical Pathology** is not yet an ACGME-recognized fellowship nor is it an American Board of Pathology subspecialty. Surgical Pathology programs, sanctioned by the ACGME began under the auspices of Selective Pathology. In order to practice Surgical Pathology, the fellow must pass the Anatomic Pathology portion of the primary certifying exam.
- Urology** candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam. Certification results reflect little or no change due to the additional time requirement

Los Angeles County Department of Health Services Audit of Compliance with Resident Supervision Guidelines DHS Policy Number 310.2

Fiscal Year 2005-2006 Summary

In fiscal year 2005-06, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) audited each teaching facility abstracting compliance information for 17 inpatient indicators. The indicators, based on resident supervision guidelines, included eight surgical indicators, three ward/discharge indicators, three ICU indicators and three invasive procedure indicators.

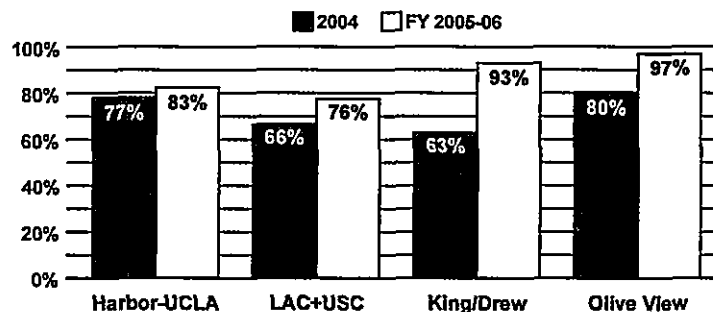
Data was collected from a sampling of hospital discharges with focus on the following services:

FACILITY	SERVICES
Harbor-UCLA	Cardiothoracic Surgery Colorectal/Amb Surgery Family Medicine Head and Neck Surgery Gynecology GI/Oncology Orthopedics Ophthalmology Pediatrics Pediatric Surgery Neonatal
LAC+USC	Cardiology Gynecology Hematology Neurology Neurosurgery Internal Medicine Neonatal Orthopedics Ophthalmology Otolaryngology Pediatrics Renal
King/Drew	Cardiology Neonatal Obstetrics Orthopedics Pediatrics Telemetry
Olive View-UCLA	GYN- Medicine and Surgery General Surgery Internal Medicine Obstetrics Pediatrics

Findings

The compliance threshold is 80%. System aggregates demonstrated a significant improvement, ranging from 7.7% to 47.6% compliance over the previous year:

**System Aggregates: Seventeen Inpatient Indicators
2004 compared with FY 2005-06**



Findings (continued)

Although the overall findings reflected continued improvement for 14 indicators, opportunities for improvement continued to exist. The 80% threshold was not met for three ward indicators, system-wide:

System-wide Non-compliance with 80% Compliance Threshold

INDICATOR	SYSTEM-WIDE
If Attending was not present, the medical record reflects that the supervisory resident discussed the case with the Attending who authorized the procedure	79%
Daily progress note was signed and/or co-signed by the Attending or note indicated "DWATT" at least every 48 hours	75%
Documentation reflects that the Attending concurs with the discharge plan either by resident's statement or by Attending's own statement	68%

FY 2005-06 Conclusion

Each facility that failed to meet the 80% compliance threshold submitted, to its facility governing body, corrective action plans addressing each deficiency. Re-audits were conducted to closely monitor the progress of a particular service. Readuit outcomes will be included in future reports.

Facilities that demonstrated the best performance and/or a greater than fifteen percent (15%) improvement received cash awards. These awards were released to the facility Quality Patient Care Fund or its equivalent to be used as described in the Committee of Interns and Residents' Memorandum of Understanding (if applicable) for the purchase of equipment for patient care.

In fiscal year 2005-06, a grand total of \$200,000 in compliance awards was distributed as follows:

Harbor-UCLA Medical Center	\$25,000
King/Drew Medical Center	\$60,000
LAC+USC Medical Center	\$25,000
Olive View-UCLA Medical Center	\$90,000

Next Report

The next report will present resident supervision audit results for the first quarter (July through September, 2006) of fiscal year 2006-07.